

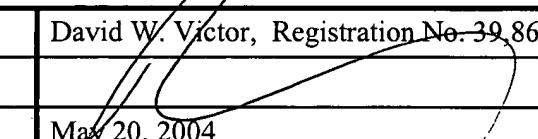
2155/B

<b>TRANSMITTAL FORM</b>		Application Number	09/533,498
<p style="text-align: center;"><i>To be used for all correspondence (after initial filing)</i></p>	Filing Date	March 23, 2000 <b>RECEIVED</b>	
	Inventor	K. W. Kirkeby <b>MAY 28 2004</b>	
	Group Art Unit	2155 <b>Technology Center 2100</b>	
	Examiner Name	Ayaz R. Sheikh	
Total Number of Pages in this Submission: 9	Attorney Docket Number	ROC990251US1	

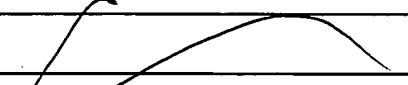
**ENCLOSURES (check all that apply)**

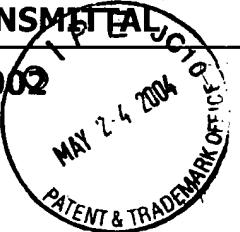
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits /Declarations <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement; 6 references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an application) <input type="checkbox"/> Formal Drawings: sheets <input type="checkbox"/> Licensing-related papers <input type="checkbox"/> Petition:  <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, and/or Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group ( <i>Appeal Notice, Brief, Reply Brief</i> ) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Certificate of Correction <input type="checkbox"/> Fee Address Indication Form <input type="checkbox"/> Other Enclosure(s) ( <i>please identify below</i> )
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual Name:	David W. Victor, Registration No. 39,867
Signature:	
Date:	May 20, 2004
KONRAD RAYNES & VICTOR, LLP 315 South Beverly Drive, Suite 210 Beverly Hills, California 90212 (310) 556-7983	
<input checked="" type="checkbox"/> The Commissioner is authorized to charge any deficiency of fees, or credit any overpayment, to Deposit Account No. 50-0585	

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Commissioner for Patents, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO, on the date indicated below.		
Typed or Printed name:	David W. Victor	
Signature:		
Date:	May 20, 2004	
		 24033 <small>PATENT TRADEMARK OFFICE</small>

<b>FEE TRANSMISSION</b>		Application Number	09/533,498
<b>for FY 2002</b>		Filing Date	March 23, 2000
		Inventor	K.W. Kirkeby
		Group Art Unit	2155
		Examiner Name	Ayaz R. Sheikh
Total Amount of Payment: <b>\$180.00</b>	Attorney Docket Number	RECEIVED MAY 28 2004 Technology Center 2100	

**METHOD OF PAYMENT** (check one)

1.  The Commissioner is hereby authorized to charge the indicated fees and/or credit any overpayments to Deposit Account Number: 50-0585
- Charge any additional fee required under 37 CFR 1.16 and 1.17
- Charge any deficiency or credit any overpayment

2.  Payment enclosed:

- Check; \_\_\_\_\_ Check No.
- Money Order
- Credit Card Approval for \_\_\_\_\_

**FEE CALCULATION**

1. BASIC FILING FEE	
Utility Filing Fee:	
Large Entity Fee Code 101	\$770.00
Fee Submitted:	\$_____
2. EXTRA CLAIMS FEES	
Total Claims _____ - 20* x \$18=	\$_____
Independent	
Claims _____ - 3* x \$86=	\$_____
Multiple Dependent \$290	\$_____
Subtotal	\$_____

\*(or number previously paid for)

**FEE CALCULATION** (continued)

3. ADDITIONAL FEES (large entity)	
<input type="checkbox"/> Surcharge- late filing fee or oath	\$130
<input type="checkbox"/> Surcharge- late provisional filing fee or cover sheet	\$50
<input type="checkbox"/> Non-English specification	\$130
<input type="checkbox"/> International type search report	\$40
<input type="checkbox"/> Requesting publication of SIR prior to action	\$920
<input type="checkbox"/> Requesting publication of SIR after action	\$1840
<input type="checkbox"/> Extension for reply- first month	\$110
<input type="checkbox"/> Extension for reply- second month	\$420
<input type="checkbox"/> Extension for reply- third month	\$950
<input type="checkbox"/> Extension for reply- fourth month	\$1480
<input type="checkbox"/> Extension for reply- fifth month	\$2010
<input type="checkbox"/> Notice of Appeal	\$330
<input type="checkbox"/> Brief in Support of Appeal	\$330
<input type="checkbox"/> Request for Oral Hearing	\$290
<input type="checkbox"/> Utility issue fee	\$1330
<input type="checkbox"/> Petition to revive (unavoidable)	\$110
<input type="checkbox"/> Petition to revive (unintentional)	\$1330
<input type="checkbox"/> Petitions to the Commissioner	\$130
<input type="checkbox"/> Petitions related to provisional applications	\$50
<input checked="" type="checkbox"/> Submission of Information Disclosure Statement	\$180
<input type="checkbox"/> Recordation of Assignment	\$40
<input type="checkbox"/> Submission after final (37 CFR 1.129(a))	\$770
<input type="checkbox"/> Request for Continued Examination (RCE)	\$770
<input type="checkbox"/> Other:	
SUBTOTAL	\$ 180.00

Submitted by:

Firm or Individual Name:	David W. Victor; Registration No. 39,867	 24033 PATENT TRADEMARK OFFICE
Signature:		
Date: May 20, 2004	Telephone: (310) 553-7977	